

United States Bankruptcy Court District of South Carolina		Voluntary Petition																				
Name of Debtor (if individual, enter Last, First, Middle): Jones, William Thomas		Name of Joint Debtor (Spouse) (Last, First, Middle): Jones, Elizabeth Howard																				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-4044		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-6715																				
Street Address of Debtor (No. and Street, City, and State): 108 Salem Road Gaffney, SC		Street Address of Joint Debtor (No. and Street, City, and State): 108 Salem Road Gaffney, SC																				
ZIP Code 29340		ZIP Code 29340																				
County of Residence or of the Principal Place of Business: Cherokee		County of Residence or of the Principal Place of Business: Cherokee																				
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):																				
ZIP Code		ZIP Code																				
Location of Principal Assets of Business Debtor (if different from street address above):																						
Type of Debtor (Form of Organization) (Check one box)	Nature of Business (Check one box)	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)																				
		<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																			
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box)																				
		<input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."	<input type="checkbox"/> Debts are primarily business debts.																			
Filing Fee (Check one box)		Chapter 11 Debtors																				
<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																				
Statistical/Administrative Information																						
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY																				
Estimated Number of Creditors <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>OVER 100,000</td> </tr> </table>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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Estimated Assets <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
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Estimated Liabilities <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Jones, William Thomas Jones, Elizabeth Howard	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: - None -	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: - None -	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A		Exhibit B	
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		(To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X /s/ Edward L. Bailey June 15, 2015 Signature of Attorney for Debtor(s) (Date) Edward L. Bailey 1153	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue			
(Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property			
(Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
(Name of landlord that obtained judgment)			
(Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Jones, William Thomas**Jones, Elizabeth Howard****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ William Thomas JonesSignature of Debtor **William Thomas Jones****X /s/ Elizabeth Howard Jones**Signature of Joint Debtor **Elizabeth Howard Jones**

Telephone Number (If not represented by attorney)

June 15, 2015

Date

Signature of Attorney***X /s/ Edward L. Bailey**

Signature of Attorney for Debtor(s)

Edward L. Bailey 1153

Printed Name of Attorney for Debtor(s)

Bailey Law Firm

Firm Name

**251 South Pine Street
Spartanburg, SC 29302**

Address

(864) 582-3733 Fax: (864) 948-9997

Telephone Number

June 15, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
District of South Carolina**

In re William Thomas Jones
Elizabeth Howard Jones

Debtor(s)

Case No.

Chapter

13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ William Thomas Jones

William Thomas Jones

Date: June 15, 2015

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
District of South Carolina**

In re William Thomas Jones
Elizabeth Howard Jones

Debtor(s)

Case No.

Chapter

13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

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Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Elizabeth Howard Jones
Elizabeth Howard Jones

Date: June 15, 2015

United States Bankruptcy Court
District of South Carolina

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

Chapter _____

13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	126,000.00		
B - Personal Property	Yes	4	69,733.00		
C - Property Claimed as Exempt	Yes	3			
D - Creditors Holding Secured Claims	Yes	7		120,969.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		21,093.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		88,240.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			6,119.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,622.00
Total Number of Sheets of ALL Schedules		31			
	Total Assets		195,733.00		
		Total Liabilities		230,302.00	

United States Bankruptcy Court
District of South Carolina

In re **William Thomas Jones,
Elizabeth Howard Jones** Case No. _____

Debtors Chapter **13**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	18,040.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	77,934.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	95,974.00

State the following:

Average Income (from Schedule I, Line 12)	6,119.00
Average Expenses (from Schedule J, Line 22)	3,622.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	8,705.67

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		14,456.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	21,093.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		88,240.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		102,696.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Residence		J	126,000.00	83,844.00
108 Salem Road				
Gaffney, SC 29340				

continuation sheets attached to the Schedule of Real Property.

(Report also on Summary of Schedules)

Total > **126,000.00**

Total >

(Report also on Summary of Schedules)

Case No.

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		Cash on Hand	J	65.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		State Employees Credit Union Savings ***5326	W	1,500.00
		State Employees Credit Union Savings ***9297	J	400.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household furnishings and goods, appliances	J	5,725.00
		Antique Piano	J	300.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Buffet, 2 Wash Stands, Curio Cabinet	J	500.00
		Christopher Radko Ornaments	J	1,500.00
		Misc. Textbooks, Wall Prints, Ornaments	J	350.00
6. Wearing apparel.		Clothes	J	450.00
7. Furs and jewelry.		Wedding Rings, 3 Charm Bracelets and Misc. Inexpensive Jewelry	J	950.00
8. Firearms and sports, photographic, and other hobby equipment.		Digital Camera	J	350.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Date of Issue: Name of Insurance Company: Employer Term Life Beneficiary: Policy No.: Face Value of Policy: \$	H	0.00
				Sub-Total > 12,090.00
				(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Date of Issue: Name of Insurance Company: Employer Term Life Beneficiary: Policy No.: Face Value of Policy: \$	W	0.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		SC Retirement	H	8,195.00
		SC Retirement	W	2,747.00
		NC State Retirement	W	34,201.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
Sub-Total > (Total of this page)				45,143.00

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Possible tax refunds	J	Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Chevrolet Trailblazer VIN: 1GNDS13S162265335 190,000 Miles	W	3,500.00
		2005 Nissan Frontier VIN: 1N6AD06U55C439944 160,000 Miles (In bad mechanical condition)	H	8,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
				Sub-Total > 11,500.00 (Total of this page)

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		1 Moveable Storage Building	J	1,000.00

Sub-Total >	1,000.00
(Total of this page)	
Total >	69,733.00

Sheet 3 of 3 continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds
\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter
with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property			
Residence 108 Salem Road Gaffney, SC 29340	S.C. Code Ann. § 15-41-30(A)(1)	50,000.00	126,000.00
Cash on Hand			
Cash on Hand	S.C. Code Ann. § 15-41-30(A)(7)	65.00	65.00
Checking, Savings, or Other Financial Accounts, Certificates of Deposit			
State Employees Credit Union Savings ***5326	S.C. Code Ann. § 15-41-30(A)(7)	1,500.00	1,500.00
State Employees Credit Union Savings ***9297	S.C. Code Ann. § 15-41-30(A)(7)	400.00	400.00
Household Goods and Furnishings			
Household furnishings and goods, appliances	S.C. Code Ann. § 15-41-30(A)(3)	5,725.00	5,725.00
Antique Piano	S.C. Code Ann. § 15-41-30(A)(3)	300.00	300.00
Books, Pictures and Other Art Objects; Collectibles			
Buffet, 2 Wash Stands, Curio Cabinet	S.C. Code Ann. § 15-41-30(A)(3)	500.00	500.00
Christopher Radko Ornaments	S.C. Code Ann. § 15-41-30(A)(7)	1,500.00	1,500.00
Misc. Textbooks, Wall Prints, Ornaments	S.C. Code Ann. § 15-41-30(A)(7)	350.00	350.00
Wearing Apparel			
Clothes	S.C. Code Ann. § 15-41-30(A)(3)	450.00	450.00
Furs and Jewelry			
Wedding Rings, 3 Charm Bracelets and Misc. Inexpensive Jewelry	S.C. Code Ann. § 15-41-30(A)(4)	950.00	950.00
Firearms and Sports, Photographic and Other Hobby Equipment			
Digital Camera	S.C. Code Ann. § 15-41-30(A)(7)	350.00	350.00
Interests in Insurance Policies			
Date of Issue: Name of Insurance Company: Employer Term Life Beneficiary: Policy No.: Face Value of Policy: \$	S.C. Code Ann. § 15-41-30(A)(8) and (9) and § 38-63-40(A)	100%	0.00
Date of Issue: Name of Insurance Company: Employer Term Life Beneficiary: Policy No.: Face Value of Policy: \$	S.C. Code Ann. § 15-41-30(A)(8) and (9) and § 38-63-40(A)	100%	0.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans			
SC Retirement	11 U.S.C. 522(b)(3)(C)	100%	8,195.00
SC Retirement	11 U.S.C. 522(b)(3)(C)	100%	2,747.00
NC State Retirement	11 U.S.C. 522(b)(3)(C)	100%	34,201.00
Other Personal Property of Any Kind Not Already Listed			
1 Moveable Storage Building	S.C. Code Ann. § 15-41-30(A)(7)	1,000.00	1,000.00

DETERMINATION OF AVAILABILITY OF WILDCARD EXEMPTION
William Thomas Jones and Elizabeth Howard Jones

Husband

Exemption Description	Available	Used	Unused
Homestead. §15-41-30(A)(1)	\$58,225	\$25,000	\$33,225
Motor Vehicle. §15-41-30(A)(2)	\$5,825	\$0	\$5,825
HHG/Clothes. §15-41-30(A)(3)	\$4,650	\$3,263	\$1,387
Jewelry. §15-41-30(A)(4)	\$1,175	\$475	\$700
Cash/liquid assets. §15-41-30(A)(5)	\$0	\$0	\$0
Tools of the trade. §15-41-30(A)(6)	\$1,750	\$0	\$1,750
Wildcard available (unused column total but no more than \$5,825). §15-41-30(A)(7)			\$5,825
Wildcard used.			\$2,583
Wildcard unused.			\$3,242

Wife

Exemption Description	Available	Used	Unused
Homestead. §15-41-30(A)(1)	\$58,225	\$25,000	\$33,225
Motor Vehicle. §15-41-30(A)(2)	\$5,825	\$0	\$5,825
HHG/Clothes. §15-41-30(A)(3)	\$4,650	\$3,262	\$1,388
Jewelry. §15-41-30(A)(4)	\$1,175	\$475	\$700.
Cash/liquid assets. §15-41-30(A)(5)	\$0	\$0	\$0
Tools of the trade. §15-41-30(A)(6)	\$1,750	\$0	\$1,750
Wildcard available (unused column total but no more than \$5,825). §15-41-30(A)(7)			\$5,825
Wildcard used.			\$2,582
Wildcard unused.			\$3,243

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDELD D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTO R H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT T	UNLIQUIDATED I D A T E D	DISPUTED D	
Account No. xxxxx-xxx306-4		Personal Property				
Cash Loan Company 405 N Limestone Street Gaffney, SC 29340-3139	H					
		Value \$ 0.00				916.00 916.00
Account No. xxxxx-xxx922-7		Personal Property				
Cash Loan Company 405 N Limestone Street Gaffney, SC 29340-3139	W					
		Value \$ 0.00				916.00 916.00
Account No. xxxxxxxxxxxxxxx0065		Opened 3/01/15 Last Active 4/15/15				
Credit Central 700 E North St Ste 15 Greenville, SC 29601	W	Personal Property				
		Value \$ Unknown				1,239.00 Unknown
Account No.		Additional Listing for: Credit Central				
Credit Central 421 N. Limestone Street Gaffney, SC 29340		Value \$				Notice Only
			Subtotal (Total of this page)			3,071.00 1,832.00

6 continuation sheets attached

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxxxxxxxxxx0063	W		Opened 1/01/15 Last Active 3/13/15				862.00	Unknown
Credit Central 700 E North St Ste 15 Greenville, SC 29601			Personal Property					
			Value \$ Unknown					
Account No.	W		Additional Listing for: Credit Central				Notice Only	
Credit Central DBA Credit Plus 1100 W Floyd Baker Blvd Ste B Gaffney, SC 29341			Value \$					
			Value \$ Unknown					
Account No. xxxxxxxxxxxxxxxx0064	W		Opened 1/01/15 Last Active 3/31/15				862.00	Unknown
Credit Central 700 E North St Ste 15 Greenville, SC 29601			Personal Property					
			Value \$ Unknown					
Account No.	H		Additional Listing for: Credit Central				Notice Only	
Credit Central DBA Credit Plus 1100 W Floyd Baker Blvd Ste B Gaffney, SC 29341			Value \$					
			Value \$ Unknown					
Account No. xxxxxxxxxxxxxxxx0013	H		Opened 12/01/14 Last Active 4/15/15				665.00	Unknown
Credit Central 700 E North St Ste 15 Greenville, SC 29601			Personal Property					
			Value \$ Unknown					
Sheet 1 of 6 continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)			2,389.00	0.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.							
Credit Central DBA Credit Plus 1100 W Floyd Baker Blvd Ste B Gaffney, SC 29341	H	Additional Listing for: Credit Central Value \$				Notice Only	
Account No.							
Excel Financial 1105 W Floyd Baker Blvd Gaffney, SC 29341	H	2005 Nissan Frontier VIN: 1N6AD06U55C439944 160,000 Miles (In bad mechanical condition) Value \$ 8,000.00				10,000.00	2,000.00
Account No.							
Excel Financial 1105 W Floyd Baker Blvd Gaffney, SC 29341	W	2006 Chevrolet Trailblazer VIN: 1GND13S162265335 190,000 Miles Value \$ 3,500.00				5,000.00	1,500.00
Account No. xxxxxxxxx0217		Judgment Lien Residence 108 Salem Road Gaffney, SC 29340 Value \$ 126,000.00				100.00	0.00
Guy Roofing 201 Jones Road Spartanburg, SC 29307	W	Personal Property Value \$ 0.00				616.00	616.00
Account No. xxx88-20							
Mack's Finance 601 N Limestone Street Gaffney, SC 29340	W						
Sheet <u>2</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)				15,716.00	4,116.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT T	UNLIQUIDATED U	DISPUTED D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
Mainstream Lending 1005 A W. Floyd Baker Blvd Gaffney, SC 29341	W		Personal Property				494.00	494.00
			Value \$ 0.00					
Account No.								
Mainstream Lending 1005 D W. Floyd Baker Blvd Gaffney, SC 29341	W		Additional Listing for: Mainstream Lending				Notice Only	
			Value \$					
Account No. xx78-16			Personal Property					
Makers Financial Group DBA Makers Finance 1009 W Floyd Baker Blvd Gaffney, SC 29341	W		Value \$ 0.00				1,188.00	1,188.00
Account No. 2320			Personal Property					
National Finance 124 Willis Plaza Gaffney, SC 29341	H		Value \$ 0.00				669.00	669.00
Account No. 2320			Personal Property					
National Finance 124 Willis Plaza Gaffney, SC 29341	W		Value \$ 0.00				669.00	669.00
Sheet 3 of 6 continuation sheets attached to Schedule of Creditors Holding Secured Claims				Subtotal (Total of this page)			3,020.00	3,020.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xx-xx9427		Personal Property				1,686.00	1,686.00
Regional Finance 515 N Limestone Street Gaffney, SC 29340	H						
Value \$ 0.00						1,686.00	1,686.00
Account No. xx-xx9057		Personal Property				2,242.00	2,242.00
Regional Finance 515 N Limestone Street Gaffney, SC 29340	W						
Value \$ 0.00						2,242.00	2,242.00
Account No.		Residence 108 Salem Road Gaffney, SC 29340					
SC Housing Corp. * ATTN: Tracey C. Easton, Agt 300-C Outlet Pointe Boulevard Columbia, SC 29210	J						
Value \$ 126,000.00						12,500.00	0.00
Account No. xxxxx0492		Opened 12/16/14 Last Active 2/18/15					
Security Fin 317 N Limestone Street Gaffney, SC 29340	H	Personal Property					
Value \$ Unknown						1,768.00	Unknown
Account No. x9074		Opened 10/31/14 Last Active 2/27/15					
Security Fin 317 N Limestone Street Gaffney, SC 29340	W	Personal Property					
Value \$ Unknown						1,517.00	Unknown
Sheet 4 of 6 continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)				19,713.00	3,928.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY	
Account No. 6107	H	Personal Property					480.00	480.00	
Southern Finance 410 N. Limestone Street Gaffney, SC 29340									
Account No. 6083	W	Personal Property					1,080.00	1,080.00	
Southern Finance 410 N. Limestone Street Gaffney, SC 29340									
Account No. xxxxxx1295	W	Opened 6/01/02 Last Active 2/27/15 Arrears thru 6/2015; \$4900 Residence 108 Salem Road Gaffney, SC 29340					71,244.00	0.00	
Specialized Loan Servi Attn: Bankruptcy 8742 Lucent Blvd. Suite 300 Highlands Ranch, CO 80129									
Account No.	W	Additional Listing for: Specialized Loan Servi					Notice Only		
Specialized Loan Servi PO Box 105219 Atlanta, GA 30348-5219									
Account No. xxxxxxxx1701	W	Opened 12/01/14 Last Active 3/16/15 Personal Property					2,487.00	Unknown	
World Finance Corp World Accept Corp/Attn BK Po Box 6429 Greenville, SC 29606									
Sheet 5 of 6 continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)					75,291.00	1,560.00	

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODE H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.						
World Finance Corp 523 N Limestone St Gaffney, SC 29340		Additional Listing for: World Finance Corp			Notice Only	
Account No. xxxxxxxx7201		Value \$				
World Finance Corp World Accept Corp./Attn BK Po Box 6429 Greenville, SC 29606	H	Opened 12/01/14 Last Active 3/31/15 Personal Property				
		Value \$ Unknown			1,769.00	Unknown
Account No.						
World Finance Corp 523 N Limestone St Gaffney, SC 29340		Additional Listing for: World Finance Corp			Notice Only	
		Value \$				
Account No.						
		Value \$				
Account No.						
		Value \$				
Sheet 6 of 6 continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)			1,769.00	0.00
		Total (Report on Summary of Schedules)			120,969.00	14,456.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

Administrative Expenses

Administrative expenses allowed under 11 U.S.C. § 503(b), and any fees and charges assessed against the estate under chapter 123 of title 28 as provided in 11 U.S.C. 507(a)(2).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Taxes and Certain Other Debts
Owed to Governmental Units****TYPE OF PRIORITY**

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODE DEBTOR H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	TYPE OF PRIORITY				AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	AMOUNT ENTITLED TO PRIORITY	
			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M			
Account No.	J	Income Taxes							
Internal Revenue Service* Centralized Insolvency PO Box 7346 Philadelphia, PA 19104-7346							0.00		
							17,000.00		17,000.00
Account No.		Additional Listing for: Internal Revenue Service*					Notice Only		
Office of Attorney General* US Dept of Justice 950 Pennsylvania Avenue, NW Washington, DC 20530-0001									
Account No.		Additional Listing for: Internal Revenue Service*					Notice Only		
United States Attorney * District of South Carolina 1441 Main Street, Ste 500 Columbia, SC 29201									
Account No.	J	Income Taxes							
NC Department of Revenue PO Box 25000 Raleigh, NC 27640-0150							0.00		
							1,040.00		1,040.00
Account No.	-						0.00		
SC Dept of Revenue* PO Box 12265 Columbia, SC 29211									
							0.00		0.00
Sheet <u>1</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims							Subtotal (Total of this page)	0.00	0.00
								18,040.00	18,040.00

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Administrative Expenses

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODE DEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT J	UNLIQUIDATED D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
							AMOUNT ENTITLED TO PRIORITY
Account No.							
Edward L. Bailey 251 South Pine Street Spartanburg, SC 29302			Attorney's Fees for Debtors				0.00
Account No.							
Account No.							
Account No.							
Account No.							
Account No.							
Subtotal (Total of this page)							
Total							
(Report on Summary of Schedules)							

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx9999	H	Opened 7/01/13 Collection Attorney Washington National Insurance				2,764.00
Caine & Weiner Po Box 5010 Woodland Hills, CA 91365	H	Medical Bills				400.00
Account No. xx1394	H					
Cardiology Consultants 1083 Boiling Springs Road Spartanburg, SC 29303	H					
Account No. xxxxxxxxxxxxxx2993	W	Opened 12/01/14 Collection Attorney Er Physician - Upstate Carolin				25.00
Cc Waco/Financial Control Services 6801 Sanger Ave Suite 195 Waco, TX 76702	W					
Account No.						
Cc Waco/Financial Control Services 105 Deanna St Robinson, TX 76706		Additional Listing for: Cc Waco/Financial Control Services				Notice Only
5 continuation sheets attached			Subtotal (Total of this page)			3,189.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxxx3230		Medical Bill				
Cherokee Mental Health Center 125 E Robinson Street Gaffney, SC 29340	W					170.00
Account No.		Opened 4/01/11 Collection Attorney Shelby Emergency Associates				
Choice Recovery 1550 Old Henderson Rd St Columbus, OH 43220	H					254.00
Account No.		Medical Bill				
Comprehensive Hospitalist Serv PO Box 732472 Dallas, TX 75303-2472	H					219.00
Account No. xxxx7347		Opened 6/01/13 Factoring Company Account Charter Communications				
Credit Management Lp 4200 International Pkwy Carrollton, TX 75007	W					344.00
Account No. xxxx8346		Opened 10/01/13 Collection Attorney Novant Health Gaffney Medical				
Dba Paragon Revenue Gr Po Box 126 Concord, NC 28026	H					385.00
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				1,372.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx8094		Opened 7/01/14 Collection Attorney Dr Raul B Cruz Md				
Gla Collection Co Inc 2630 Gleeson Ln Louisville, KY 40299	H					371.00
Account No. x6179		Medical Bill				
Hometown Oxygen 2820 Selwyn Ave Ste 785 Charlotte, NC 28209-1785	H					1,248.00
Account No. xxx2576		Med1 02 Mary Black Memorial Hospital				
Med Data Sys 2120 15th Ave Vero Beach, FL 32960	H					616.00
Account No. xxxxxx9423		Opened 6/01/10 Factoring Company Account Ge Money Bank				
Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123	W					1,378.00
Account No. xxF1T		Med1 Upstate Carolina Radiology				
Rec Mgt Grp Po Box 6070 Columbus, GA 31917	H					74.00
Sheet no. <u>2</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				3,687.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.						
Rec Mgt Grp 2901 University Av Columbus, GA 31907		Additional Listing for: Rec Mgt Grp				Notice Only
Account No. xxxxx4799		Opened 9/01/04 Last Active 4/27/15 Student Loans				
Sc Student Loan Corp Po Box 21487 Columbia, SC 29221	H	Med1 02 Next Care Urgent Care				2,825.00
Account No. xxxxxxxx9301						
Sca P O Box 910 Edenton, NC 27932	H	Med1 Shelby Pathology Group				61.00
Account No. xxxxxx8345						
Southern Ca 2420 Professional Rocky Mount, NC 27804	H	Medical Bills				132.00
Account No.						
Spartanburg Medical Center 1001 N Pine Street Spartanburg, SC 29303-3153	H					1,132.00
Sheet no. 3 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			4,150.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxx6631						
Tek-collect Inc 871 Park St Columbus, OH 43215	H	Opened 3/01/12 Collection Attorney Shannon M Pye Family Dentistry				160.00
Account No. xxxx3949						
Transworld Sys Inc/51 507 Prudential Rd Horsham, PA 19044	H	Opened 10/01/13 Collection Attorney Upstate Carolina Medical Cente				426.00
Account No.						
U S Dept Of Ed/Gsl/Atl Po Box 4222 Iowa City, IA 52244	H	Opened 2/01/11 Last Active 1/23/15 Student Loans				54,017.00
Account No.						
US Dept. of Education PO Box 105028 Atlanta, GA 30348-5028		Additional Listing for: U S Dept Of Ed/Gsl/Atl				Notice Only
Account No.						
Upstate Carolina Radiology c/o Receivable Management 2901 University Ave. #29 Columbus, GA 31907	H	Medical Bills				52.00
Sheet no. <u>4</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			<u>54,655.00</u>

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE DEBTOR	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.		Medical Bill				
Upstate SC Emergency c/o Phoenix Financial Services PO Box 361450 Indianapolis, IN 46236-1450	W					16.00
Account No. xxxxxxxxxxxx8581		Opened 3/01/12 Last Active 4/30/15 Student Loans				
Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707	W					21,092.00
Account No.		Additional Listing for: Us Dept Of Ed/glelsi				Notice Only
Great Lakes PO Box 530229 Atlanta, GA 30353-0229						
Account No. xxxxxxxxxxxx0001		Opened 5/01/09 Last Active 10/04/11 Utility Bill				
Verizon 500 Technology Dr Ste 550 Weldon Spring, MO 63304	W					79.00
Account No.		Additional Listing for: Verizon				Notice Only
Verizon 1 Verizon Pl Alpharetta, GA 30004						
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				21,187.00
		Total (Report on Summary of Schedules)				88,240.00

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

**Aaron's Sales and Lease
1250 W Floyd Baker Blvd
Gaffney, SC 29341**

**Rent to Own Computer, Chairs and Lawnmower;
\$2420; \$362.26/month**

**Graceland Rentals
PO Box 1000 Dept #162
Memphis, TN 38148-0162**

**Rent To Own Storage Building; \$1122
Arrears thru 6/2015; \$424**

In re **William Thomas Jones,
Elizabeth Howard Jones**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

Fill in this information to identify your case:	
Debtor 1	<u>William Thomas Jones</u>
Debtor 2 (Spouse, if filing)	<u>Elizabeth Howard Jones</u>
United States Bankruptcy Court for the: <u>DISTRICT OF SOUTH CAROLINA</u>	
Case number (If known)	<hr/>

Check if this is:

- An amended filing
- A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
ment status*	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
ion	Teacher	Teacher
er's name	Cherokee County Schools	
er's address	PO Box 460 Gaffney, SC 29342	

How long employed there?

10 Months

3 Years

***See Attachment for Additional Employment Information**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>3,427.00</u>	\$ <u>4,318.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>3,427.00</u>	\$ <u>4,318.00</u>

Debtor 1 **William Thomas Jones**
 Debtor 2 **Elizabeth Howard Jones**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4. \$ 3,427.00	\$ 4,318.00	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 539.00	\$ 863.00	
5b. Mandatory contributions for retirement plans	5b. \$ 274.00	\$ 345.00	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00	
5e. Insurance	5e. \$ 219.00	\$ 176.00	
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00	
5g. Union dues	5g. \$ 0.00	\$ 0.00	
5h. Other deductions. Specify: <u>Term life ins. on debtor</u>	5h. + \$ 8.00	+ \$ 26.00	
	\$ 6.00	\$ 0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 1,046.00	\$ 1,410.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,381.00	\$ 2,908.00	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00	
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00	
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00	
8e. Social Security	8e. \$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00	
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00	
8h. Other monthly income. Specify: <u>Tractor Supply (Gross \$616)</u> <u>Education Express (Gross \$300)</u>	8h. + \$ 560.00	+ \$ 0.00	
	\$ 0.00	\$ 270.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 560.00	\$ 270.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,941.00	+ \$ 3,178.00	= \$ 6,119.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. + \$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 6,119.00		
13. Do you expect an increase or decrease within the year after you file this form?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: <input type="text"/>		

Debtor 1 **William Thomas Jones**
Debtor 2 **Elizabeth Howard Jones**

Case number (if known) _____

Official Form B 6I
Attachment for Additional Employment Information

Debtor	
Occupation	Shift Leader
Name of Employer	Tractor Supply
How long employed	2 Years
Address of Employer	200 Powell Place Brentwood, TN 37027

Spouse	
Occupation	Cashier
Name of Employer	Education Express
How long employed	11 Months
Address of Employer	8111 Concord Mills Blvd. Suite 518 Concord, NC 28027

Fill in this information to identify your case:

Debtor 1	William Thomas Jones
Debtor 2	Elizabeth Howard Jones
(Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:
 MM / DD / YYYY
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Son

Dependent's age

14

Does dependent live with you?

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **633.00**

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	0.00
4c. \$	150.00
4d. \$	0.00
5. \$	0.00

Debtor 1 **William Thomas Jones**
 Debtor 2 **Elizabeth Howard Jones**

Case number (if known) _____

6. Utilities:	6a. Electricity, heat, natural gas	6a. \$ 240.00
	6b. Water, sewer, garbage collection	6b. \$ 0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 550.00
	6d. Other. Specify: Internet not included in line 6c	6d. \$ 50.00
7. Food and housekeeping supplies	7. \$ 660.00	
8. Childcare and children's education costs	8. \$ 0.00	
9. Clothing, laundry, and dry cleaning	9. \$ 180.00	
10. Personal care products and services	10. \$ 53.00	
11. Medical and dental expenses	11. \$ 89.00	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 300.00	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 5.00	
14. Charitable contributions and religious donations	14. \$ 25.00	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ 0.00	
15b. Health insurance	15b. \$ 0.00	
15c. Vehicle insurance	15c. \$ 219.00	
15d. Other insurance. Specify: _____	15d. \$ 0.00	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Vehicle tax	16. \$ 34.00	
Specify: Income tax underwithholding adjustment	\$ 28.00	
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$ 0.00	
17b. Car payments for Vehicle 2	17b. \$ 0.00	
17c. Other. Specify: Graceland Rentals	17c. \$ 106.00	
17d. Other. Specify: Aaron's Sales and Lease	17d. \$ 300.00	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$ 0.00	
19. Other payments you make to support others who do not live with you. Specify: _____	\$ 0.00	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$ 0.00	
20b. Real estate taxes	20b. \$ 0.00	
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00	
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00	
20e. Homeowner's association or condominium dues	20e. \$ 0.00	
21. Other: Specify: _____	21. +\$ 0.00	
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$ 3,622.00	
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 6,119.00	
23b. Copy your monthly expenses from line 22 above.	23b. -\$ 3,622.00	
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ 2,497.00	

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain: _____

United States Bankruptcy Court
District of South CarolinaIn re William Thomas Jones
Elizabeth Howard Jones

Debtor(s)

Case No.

Chapter 13**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 33 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date June 15, 2015Signature /s/ William Thomas Jones
William Thomas Jones
DebtorDate June 15, 2015Signature /s/ Elizabeth Howard Jones
Elizabeth Howard Jones
Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
District of South Carolina

In re **William Thomas Jones**
Elizabeth Howard Jones

Case No.

Debtor(s)

Chapter

13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$19,197.00	2015 YTD: Husband Employment Income
\$46,907.00	2014: Husband Employment Income
\$43,549.00	2013: Husband Employment Income
\$23,857.00	2015 YTD: Wife Employment Income
\$49,909.00	2014: Wife Employment Income
\$39,591.00	2013: Wife Employment Income

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
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3. Payments to creditors

None *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Reg auto payments >\$600 in 90 days		\$0.00	\$0.00

None b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Credit Central DBA Credit Plus v. Elizabeth Jones	Debt Collection	Cherokee County	Pending

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

3

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED Internal Revenue Service	DATE OF SEIZURE Spring 2015	DESCRIPTION AND VALUE OF PROPERTY Tax refund seized of \$3000+ (est) for Student Loans
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5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT	
NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Buford Street United Methodist	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT Past 12 mths	DESCRIPTION AND VALUE OF GIFT \$300 (est)
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8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Edward L. Bailey 251 South Pine Street Spartanburg, SC 29302		\$447
Access Counseling	May 2015	\$15; Credit Counseling Certificates

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Diamond Jewelers	3/2015	Gold jewelry; \$101

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
State Employees' Credit Union Asheville, NC 28813-5185	Salary advance savings acct	\$525; 4/30/2015

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF
GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18 . Nature, location and name of business

None

■ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF

SOCIAL-SECURITY OR

OTHER INDIVIDUAL

TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND

ENDING DATES

None

■ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date June 15, 2015

Signature /s/ William Thomas Jones
William Thomas Jones
Debtor

Date June 15, 2015

Signature /s/ Elizabeth Howard Jones
Elizabeth Howard Jones
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court
District of South Carolina

In re **William Thomas Jones**
Elizabeth Howard Jones

Debtor(s)

Case No.
Chapter

13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 3,500.00
Prior to the filing of this statement I have received	\$ 447.00
Balance Due	\$ 3,053.00

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

See Attorney Fee and Authorization Contract attached.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

See Attorney Fee and Authorization Contract attached.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: June 15, 2015

/s/ Edward L. Bailey
Edward L. Bailey 1153
Bailey Law Firm
251 South Pine Street
Spartanburg, SC 29302
(864) 582-3733 Fax: (864) 948-9997

ATTORNEY FEE AND AUTHORIZATION CONTRACT
(Chapter 13)

1. I am employing the Bailey Law Firm to complete the following Chapter 13 bankruptcy services:

A. **INCLUDING:** Interviewing, fact gathering, and advice necessary to file the case; preparation and filing of all documents required by the court; representation at the §341 meeting of creditors and confirmation hearings; limited advice after the case has been filed, but before the case has been dismissed or discharged, about matters related to the case as it existed or was anticipated at time of filing; and other specific services as follows:

B. **NOT INCLUDING:** Amendments to the bankruptcy schedules that are my fault (including amendments to add creditors), work generated as a result of my mistakes, second §341 hearing resulting from my failure to attend the first scheduled §341 meeting of creditors, motions relating to new matters or matters not anticipated at the time of filing, objections to claims, any work generated as a result of my failure to make payments to any creditor or to maintain insurance on any collateral (for example, a creditor's 362 motion), defense against any petitions to dismiss by the US Trustee, defense against any actions brought by my creditors (including objections to discharge or dischargeability), elections to convert to a Chapter 7 bankruptcy, appeals, recovery of titles from creditors, or any and all post-discharge matters.

2. I understand that it is customary in the legal profession to use legal assistants to perform many routine tasks, and I hereby authorize the Bailey Law Firm to use such legal assistants in connection with my case.

3. I agree to pay the Bailey Law Firm, all costs including copies and postage, and

a. \$ 3500 for his services,
 b. \$ 43 for the downloaded credit report fee (\$23 individual, \$43 joint), and
 c. \$ 310 for the court filing fee,

for a total of

\$ 3853.

This will be paid as follows:

All costs, e.g. copies and postage, will be paid directly to the Bailey Law Firm when they are incurred, unless other arrangements are made,

\$ 800 will be paid directly to the Bailey Law Firm according to a separate schedule worked out with them, and then
 \$ 3053 will be paid through the Chapter 13 plan.

In the application of the fees paid directly to the Bailey Law Firm in the paragraph above, the credit report, court filing fees, and costs will be considered to have been paid first and the attorney fees last. The attorney fees are deemed a non-refundable flat fee for Mr. Bailey's services. There will be an additional fee of \$100 for each month the filing of the case is delayed beyond the final payment due date expressed in the separate fee payment schedule, if any, unless specifically waived by the Bailey Law Firm.

4. I agree to pay a reasonable fee for other services that become necessary during the Chapter 13 case but are not included according to paragraph 1 above, and agree and understand that Mr. Bailey does not represent me in any of these new matters, unless he and I have first agreed for him to do so and arranged for payment of his fees. Further, in order to control excessive phone calls, please note that (a) all telephone conversations to our office must be as brief as possible, (b) there is no charge for calls that were solicited by our office, and (c) if you are calling about a new matter brought about by changes in your situation, a matter brought about by creditor action, or repetitive questions previously addressed to you in writing, there will be a charge of \$15 (subject to change at our discretion) for each call to a legal assistant which lasts less than 15 minutes (additional charges will be assessed for longer calls). The fees in this paragraph are to be paid at the time the services are rendered unless other arrangements have been approved by the Bailey Law Firm ahead of time.

5. If I fail to timely provide all relevant information, or if I do not cooperate with the Bailey Law Firm or timely make any fee payments as agreed above, or if my financial circumstances worsen before filing bankruptcy such that Mr. Bailey believes a Chapter 13 plan would not be feasible, my attorney(s) may withdraw from this contract and cease to represent me. In that event, or in the event that I choose to end this contract before completion, Mr. Bailey will review all time spent and, in his discretion, refund any portion of the fees considered by him as unreasonable under the circumstances.

7. **Local Rule 9010: Extent of an Attorney's Duty to Represent.** Except as may be provided in an attorney's written agreement with a party concerning appeals and adversary proceedings, any attorney who files documents for or on behalf of a debtor or party in interest shall remain the responsible attorney of record for all purposes including the representation of the party at all hearings and in all matters that arise in conjunction with the case. The Court may permit counsel to withdraw from representation of a party upon motion which details the reason for the request for withdrawal and indicates the consent of that party or upon notice and an opportunity for hearing to that party and any trustee appointed in the case.

8. My attorneys have the right to waive any default of opposing counsel while handling this matter.

9. **NOTICE: THIS CONTRACT DOES NOT BECOME BINDING AND NO ONE AT THE BAILEY LAW FIRM REPRESENTS ME UNTIL A MINIMUM OF \$ 250 HAS BEEN PAID.**

5/12/15

Date

x Elizabeth H. Jones
 Client _____ Payroll Deduction _____
x Will T. Jones
 Client _____ Payroll Deduction _____
EB
 Bailey Law Firm

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court
District of South Carolina**

In re William Thomas Jones
Elizabeth Howard Jones

Debtor(s)

Case No.

Chapter

13

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

William Thomas Jones
Elizabeth Howard Jones

Printed Name(s) of Debtor(s)

Case No. (if known) _____

<input checked="" type="checkbox"/> <u>/s/ William Thomas Jones</u>	June 15, 2015
Signature of Debtor	Date
<input checked="" type="checkbox"/> <u>/s/ Elizabeth Howard Jones</u>	June 15, 2015
Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

**United States Bankruptcy Court
District of South Carolina**

In re **William Thomas Jones
Elizabeth Howard Jones**

Debtor(s)

Case No.

Chapter

13

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

Master mailing list of creditors submitted via:

- (a) computer diskette
- (b) scannable hard copy
(number of sheets submitted)
- (c) electronic version filed via CM/ECF

Date: June 15, 2015

/s/ Edward L. Bailey

Signature of Attorney

Edward L. Bailey 1153

Bailey Law Firm

251 South Pine Street

Spartanburg, SC 29302

(864) 582-3733 Fax: (864) 948-9997

Typed/Printed Name/Address/Telephone

1153

District Court I.D. Number

Fill in this information to identify your case:

Debtor 1	William Thomas Jones
Debtor 2	Elizabeth Howard Jones (Spouse, if filing)
United States Bankruptcy Court for the: <u>District of South Carolina</u>	
Case number (if known)	

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>4,067.66</u>	\$ <u>4,638.01</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm Gross receipts (before all deductions) <u>\$ 0.00</u> Ordinary and necessary operating expenses <u>-\$ 0.00</u> Net monthly income from a business, profession, or farm <u>\$ 0.00</u> Copy here -> <u>\$ 0.00</u> <u>\$ 0.00</u>		
6. Net income from rental and other real property Gross receipts (before all deductions) <u>\$ 0.00</u> Ordinary and necessary operating expenses <u>-\$ 0.00</u> Net monthly income from rental or other real property <u>\$ 0.00</u> Copy here -> <u>\$ 0.00</u> <u>\$ 0.00</u>		

Debtor 1
Debtor 2

William Thomas Jones
Elizabeth Howard Jones

Case number (if known)

7. **Interest, dividends, and royalties**

8. **Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
For your spouse \$ **0.00**

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ **0.00** \$ **0.00**

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. \$ **0.00** \$ **0.00**
10b. \$ **0.00** \$ **0.00**
10c. Total amounts from separate pages, if any. + \$ **0.00** \$ **0.00**

11. **Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ **4,067.66** + \$ **4,638.01** = \$ **8,705.67**

Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. **Copy your total average monthly income from line 11.** \$ **8,705.67**

13. **Calculate the marital adjustment.** Check one:

You are not married. Fill in 0 on line 3d.
 You are married and your spouse is filing with you. Fill in 0 in line 13d.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13d.

13a. \$
13b. \$
13c. +\$
13d. Total \$ **0.00** Copy here=> 13d. - **0.00**

14. **Your current monthly income.** Subtract line 13d from line 12.

14. \$ **8,705.67**

15. **Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here=> 15a. \$ **8,705.67**

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

15b. \$ **104,468.04**

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known)

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

SC

16b. Fill in the number of people in your household.

3

16c. Fill in the median family income for your state and size of household.

16c. \$ 54,904.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Disposable Income* (Official Form 22C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. **Copy your total average monthly income from line 11 .** 18. \$ 8,705.67

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d.

If the marital adjustment does not apply, fill in 0 on line 19a.

19a.-\$ 0.00

Subtract line 19a from line 18.

19b. \$ 8,705.67

20. **Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b.....

20a. \$ 8,705.67

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

20b. \$ 104,468.04

20c. Copy the median family income for your state and size of household from line 16c.....

\$ 54,904.00

21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Debtor 1 **William Thomas Jones**
Debtor 2 **Elizabeth Howard Jones**

Case number (if known)

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ William Thomas Jones

William Thomas Jones

Signature of Debtor 1

Date **June 15, 2015**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

X /s/ Elizabeth Howard Jones

Elizabeth Howard Jones

Signature of Debtor 2

Date **June 15, 2015**

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	<u>William Thomas Jones</u>
Debtor 2	<u>Elizabeth Howard Jones</u> (Spouse, if filing)
United States Bankruptcy Court for the:	<u>District of South Carolina</u>
Case number (if known)	

Check if this is an amended filing

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

12/14

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,249.00
7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1 **William Thomas Jones**
 Debtor 2 **Elizabeth Howard Jones**

Case number (if known) _____

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 60
 7b. Number of people who are under 65 X 3
 7c. **Subtotal.** Multiply line 7a by line 7b. \$ 180.00 Copy line 7c here=> \$ 180.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$ 144
 7e. Number of people who are 65 or older X 0
 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy line 7f here=> \$ 0.00

7g. **Total.** Add line 7c and line 7f \$ 180.00 Copy total here=> 7g. \$ 180.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

Housing and utilities - Insurance and operating expenses
housing and utilities - Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 527.00

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 690.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
SC Housing Corp. *	\$ <u>236.83</u>
Specialized Loan Servi	\$ <u>633.00</u>

9b. Total average monthly payment \$ 869.83 Copy line 9b here=> -\$ 869.83 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

9c. \$ 0.00 Copy line 9c here=> \$ 0.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$ 0.00

Explain why: _____

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known)

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$ 488.00

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: 2005 Nissan Frontier VIN: 1N6AD06U55C439944 160,000 Miles (In bad mechanical condition)

13a. Ownership or leasing costs using IRS Local Standard 13a. \$ 517.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment	
Excel Financial	\$ <u>151.57</u>	
		Copy 13b here => -\$ <u>151.57</u> Repeat this amount on line 33b.
13c. Net Vehicle 1 ownership or lease expense	\$ <u>365.43</u>	Copy net Vehicle 1 expense here => \$ <u>365.43</u>

Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0.

Vehicle 2 Describe Vehicle 2: 2006 Chevrolet Trailblazer VIN: 1GNDS13S162265335 190,000 Miles

13d. Ownership or leasing costs using IRS Local Standard 13d. \$ 517.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment	
Excel Financial	\$ <u>66.32</u>	
		Copy 13e here => -\$ <u>66.32</u>
13f. Net Vehicle 2 ownership or lease expense	\$ <u>450.68</u>	Copy net Vehicle 2 expense here => \$ <u>450.68</u>

Subtract line 13e from line 13d. if this number is less than \$0, enter \$0.

- 14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.
- 15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

\$ 0.00

\$ 0.00

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.
Do not include real estate, sales, or use taxes. \$ 1,554.00

17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ 620.00

18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 34.00

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ 0.00

20. **Education:** The total monthly amount that you pay for education that is either required:
as a condition for your job, or
for your physically or mentally challenged dependent child if no public education is available for similar services. \$ 0.00

21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.
Do not include payments for any elementary or secondary school education. \$ 0.00

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
Payments for health insurance or health savings accounts should be listed only in line 25. \$ 0.00

23. **Optional telephone and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted. +\$ 50.00

24. Add all of the expenses allowed under the IRS expense allowances.

Add lines 6 through 23.

Additional Expense Deductions These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ 395.00

Disability insurance \$ 6.00

Health savings account +\$ 0.00

Total \$ 401.00 Copy total here=> \$ 401.00

Do you actually spend this total amount?

No. How much do you actually spend?

Yes \$ _____

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. \$ 0.00

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

By law, the court must keep the nature of these expenses confidential. \$ 0.00

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known)

28. **Additional home energy costs.** Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8.
If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs.
You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. \$ 0.00

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.
You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.
* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment. \$ 0.00

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.
You must show that the additional amount claimed is reasonable and necessary. \$ 0.00

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). \$ 25.00

32. **Add all of the additional expense deductions**
Add lines 25 through 31. \$ 426.00

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home

33a. Copy line 9b here => \$ 869.83

Loans on your first two vehicles

33b. Copy line 13b here => \$ 151.57

33c. Copy line 13e here => \$ 66.32

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

No

Yes

\$ _____

No

Yes

\$ _____

No

Yes

+ \$ _____

33d. **-NONE-**

33e.

33f.

33g. Total average monthly payment. Add lines 33a through 33f

\$ 1,087.72

Copy total here=>

\$ 1,087.72

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known)

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.
 Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
Specialized Loan Servi	Residence 108 Salem Road Gaffney, SC 29340	\$ 4,900.00	÷ 60 = \$ 81.67
		\$ _____	÷ 60 = \$ _____
		\$ _____	÷ 60 = +\$ _____
		Total \$ 81.67	Copy total here=> \$ 81.67

35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ 22,461.00 ÷ 60 \$ 374.34
\$ 2,115.00

36. Projected monthly Chapter 13 plan payment

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense

X 9.10
\$ 192.47 Copy total here=> \$ 192.47

37. Add all of the deductions for debt payment.

Add lines 33g through 36.

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ 5,518.11

Copy line 32, All of the additional expense deductions \$ 426.00

Copy line 37, All of the deductions for debt payment +\$ 1,736.20

Total deductions \$ 7,680.31 Copy total here=> \$ 7,680.31

Debtor 1 William Thomas Jones
Debtor 2 Elizabeth Howard Jones

Case number (if known) _____

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 14 of Form 22C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period** \$ 8,705.67

40. **Fill in any reasonably necessary income you receive for support for dependent children.** The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 22C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ 0.00

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ 0.00

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here. => \$ 7,680.31

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
43a. Aaron's Sales over 60m	\$ <u>41.00</u>
43b. Graceland Rentals over 60m	\$ <u>19.00</u>
43c.	\$ <u></u>
43d. Total. Add lines 43a through 43c.	\$ <u>60.00</u> Copy 43d here=> \$ <u>60.00</u>
44. Total adjustments. Add lines 40 through 43d.	=> \$ <u>7,740.31</u> Copy total here=> -\$ <u>7,740.31</u>
45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.	\$ <u>965.36</u>

Part 3: Change in Income or Expenses

46. **Change in income or expenses.** If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2				<input type="checkbox"/> Decrease	\$ _____

Debtor 1
Debtor 2

William Thomas Jones
Elizabeth Howard Jones

Case number (*if known*)

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ William Thomas Jones

William Thomas Jones

Signature of Debtor 1

Date **June 15, 2015**

MM / DD / YYYY

X /s/ Elizabeth Howard Jones

Elizabeth Howard Jones

Signature of Debtor 2

Date **June 15, 2015**

MM / DD / YYYY

AARON'S SALES AND LEASE
1250 W FLOYD BAKER BLVD
GAFFNEY SC 29341

CAINE & WEINER
PO BOX 5010
WOODLAND HILLS CA 91365

CARDIOLOGY CONSULTANTS
1083 BOILING SPRINGS ROAD
SPARTANBURG SC 29303

CASH LOAN COMPANY
405 N LIMESTONE STREET
GAFFNEY SC 29340-3139

CC WACO/FINANCIAL CONTROL SERVICES
6801 SANGER AVE
SUITE 195
WACO TX 76702

CC WACO/FINANCIAL CONTROL SERVICES
105 DEANNA ST
ROBINSON TX 76706

CHEROKEE MENTAL HEALTH CENTER
125 E ROBINSON STREET
GAFFNEY SC 29340

CHOICE RECOVERY
1550 OLD HENDERSON RD ST
COLUMBUS OH 43220

COMPREHENSIVE HOSPITALIST SERV
PO BOX 732472
DALLAS TX 75303-2472

CREDIT CENTRAL
700 E NORTH ST STE 15
GREENVILLE SC 29601

CREDIT CENTRAL
421 N. LIMESTONE STREET
GAFFNEY SC 29340

CREDIT CENTRAL
DBA CREDIT PLUS
1100 W FLOYD BAKER BLVD STE B
GAFFNEY SC 29341

CREDIT MANAGEMENT LP
4200 INTERNATIONAL PKWY
CARROLLTON TX 75007

DBA PARAGON REVENUE GR
PO BOX 126
CONCORD NC 28026

EXCEL FINANCIAL
1105 W FLOYD BAKER BLVD
GAFFNEY SC 29341

GLA COLLECTION CO INC
2630 GLEESON LN
LOUISVILLE KY 40299

GRACELAND RENTALS
PO BOX 1000 DEPT #162
MEMPHIS TN 38148-0162

GREAT LAKES
PO BOX 530229
ATLANTA GA 30353-0229

GUY ROOFING
201 JONES ROAD
SPARTANBURG SC 29307

HOMETOWN OXYGEN
2820 SELWYN AVE STE 785
CHARLOTTE NC 28209-1785

INTERNAL REVENUE SERVICE*
CENTRALIZED INSOLVENCY
PO BOX 7346
PHILADELPHIA PA 19104-7346

MACK'S FINANCE
601 N LIMESTONE STREET
GAFFNEY SC 29340

MAINSTREAM LENDING
1005 A W. FLOYD BAKER BLVD
GAFFNEY SC 29341

MAINSTREAM LENDING
1005 D W. FLOYD BAKER BLVD
GAFFNEY SC 29341

MAKERS FINANCIAL GROUP
DBA MAKERS FINANCE
1009 W FLOYD BAKER BLVD
GAFFNEY SC 29341

MED DATA SYS
2120 15TH AVE
VERO BEACH FL 32960

MIDLAND FUNDING
8875 AERO DR STE 200
SAN DIEGO CA 92123

NATIONAL FINANCE
124 WILLIS PLAZA
GAFFNEY SC 29341

NC DEPARTMENT OF REVENUE
PO BOX 25000
RALEIGH NC 27640-0150

OFFICE OF ATTORNEY GENERAL*
US DEPT OF JUSTICE
950 PENNSYLVANIA AVENUE, NW
WASHINGTON DC 20530-0001

REC MGT GRP
PO BOX 6070
COLUMBUS GA 31917

REC MGT GRP
2901 UNIVERSITY AV
COLUMBUS GA 31907

REGIONAL FINANCE
515 N LIMESTONE STREET
GAFFNEY SC 29340

SC DEPT OF REVENUE*
PO BOX 12265
COLUMBIA SC 29211

SC HOUSING CORP. *
ATTN: TRACEY C. EASTON, AGT
300-C OUTLET POINTE BOULEVARD
COLUMBIA SC 29210

SC STUDENT LOAN CORP
PO BOX 21487
COLUMBIA SC 29221

SCA
P O BOX 910
EDENTON NC 27932

SECURITY FIN
317 N LIMESTONE STREET
GAFFNEY SC 29340

SOUTHERN CA
2420 PROFESSIONAL
ROCKY MOUNT NC 27804

SOUTHERN FINANCE
410 N. LIMESTONE STREET
GAFFNEY SC 29340

SPARTANBURG MEDICAL CENTER
1001 N PINE STREET
SPARTANBURG SC 29303-3153

SPECIALIZED LOAN SERVI
ATTN: BANKRUPTCY
8742 LUCENT BLVD. SUITE 300
HIGHLANDS RANCH CO 80129

SPECIALIZED LOAN SERVI
PO BOX 105219
ATLANTA GA 30348-5219

TEK-COLLECT INC
871 PARK ST
COLUMBUS OH 43215

TRANSWORLD SYS INC/51
507 PRUDENTIAL RD
HORSHAM PA 19044

U S DEPT OF ED/GSL/ATL
PO BOX 4222
IOWA CITY IA 52244

UNITED STATES ATTORNEY *
DISTRICT OF SOUTH CAROLINA
1441 MAIN STREET, STE 500
COLUMBIA SC 29201

UPSTATE CAROLINA RADIOLOGY
C/O RECEIVABLE MANAGEMENT
2901 UNIVERSITY AVE. #29
COLUMBUS GA 31907

UPSTATE SC EMERGENCY
C/O PHOENIX FINANCIAL SERVICES
PO BOX 361450
INDIANAPOLIS IN 46236-1450

US DEPT OF ED/GLEISI
PO BOX 7860
MADISON WI 53707

US DEPT. OF EDUCATION
PO BOX 105028
ATLANTA GA 30348-5028

VERIZON
500 TECHNOLOGY DR
STE 550
WELDON SPRING MO 63304

VERIZON
1 VERIZON PL
ALPHARETTA GA 30004

WORLD FINANCE CORP
WORLD ACCEPT CORP/ATTN BK
PO BOX 6429
GREENVILLE SC 29606

WORLD FINANCE CORP
WORLD ACCEPT CORP./ATTN BK
PO BOX 6429
GREENVILLE SC 29606

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523 N LIMESTONE ST
GAFFNEY SC 29340